

SCC eFile	2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	213534330			
<div style="display: flex; justify-content: space-between;"> <div> 1.) CORPORATION NAME: CFA Institute 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: C. JEANNIE ANDERSON 560 RAY C. HUNT DRIVE CHARLOTTESVILLE, VA </div> <div> DUE DATE: 7/31/2013 SCC ID NO: 02901643 5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE: ALBEMARLE COUNTY					
4.) STATE OR COUNTRY OF INCORPORATION: VA					
6.) PRINCIPAL OFFICE ADDRESS: <div style="text-align: center;"> ADDRESS: 560 RAY C HUNT DRIVE CITY/ST/ZIP: CHARLOTTESVILLE, VA 22903 </div>					
7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: JOHN D ROGERS TITLE: P/CEO ADDRESS: CFA INSTITUTE 560 RAY C. HUNT DR. CITY/ST/ZIP/CO: CHARLOTTESVILLE, VA 22903 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: middle;"> OFFICER <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: JOHN D ROGERS TITLE: P/CEO ADDRESS: CFA INSTITUTE 560 RAY C. HUNT DR. CITY/ST/ZIP/CO: CHARLOTTESVILLE, VA 22903	<input checked="" type="checkbox"/>	OFFICER <input checked="" type="checkbox"/> DIRECTOR
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: AARON LOW TITLE: VICE CHAIRMAN ADDRESS: LUMEN ADVISORS. 30 CECIL ST. CITY/ST/ZIP/CO: SINGAPORE, 049712, SG </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: middle;"> OFFICER <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: AARON LOW TITLE: VICE CHAIRMAN ADDRESS: LUMEN ADVISORS. 30 CECIL ST. CITY/ST/ZIP/CO: SINGAPORE, 049712, SG	<input checked="" type="checkbox"/>	OFFICER <input checked="" type="checkbox"/> DIRECTOR
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NAME:	GIUSEPPE BALLOCCHI	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PICTET & CIE, BANQUIERS, ROUTE DES ACACIAS 60		
CITY/ST/ZIP/CO:	GENEVA 73, CH-1211, CH		
NAME:	COLIN W. MCLEAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	SVM ASSET MNGT., 7 CASTLE ST.		
CITY/ST/ZIP/CO:	EDINBURGH, EH2 3AH, GB		
NAME:	FREDERIC P. LEBEL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	HFS HEDGE FUND SELECTION S.A., CHEMIN DES RAN		
CITY/ST/ZIP/CO:	FOUNEX, 1297, CH		
NAME:	SAEED M. AL-HAJERI	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	ADIA BLDG., 211 CORNICHE ST.		
CITY/ST/ZIP/CO:	ABU DHABI, , AE		
NAME:	HEATHER BRILLIANT	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	MORNINGSTAR, 22 W. WASHINGTON		
CITY/ST/ZIP/CO:	CHICAGO, IL 60602		
NAME:	BETH HAMILTON-KEEN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	MAWER INVESTMENT MNGT., 603-7 AVENUE SW		
CITY/ST/ZIP/CO:	CALGARY, ALBERT T2P 2T5, CA		
NAME:	ROBERT JENKINS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	FLAT J, 31 RANDOLPH AVE.		
CITY/ST/ZIP/CO:	LONDON, W9 1BQ, GB		
NAME:	JAMES G. JONES	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	STERLING INVESTMENT ADVISORS, 2095 S. BOSTON		
CITY/ST/ZIP/CO:	BOLIVAR, MO 65613		
NAME:	ATTILA KOKSAL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	STANDARD UNLU A.S., B BLK NO:1 KAT:1		
CITY/ST/ZIP/CO:	ISTANBUL, MASLAK 34398, TR		
NAME:	MARK LAZBERGER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	COLONIAL FIRST STATE GLOBAL ASSET MNGT., LEVE		
CITY/ST/ZIP/CO:	SYDNEY, NSW 2000, AU		
NAME:	MATTHEW H. SCANLAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	RS INVESTMENTS, 388 MARKET ST., SUITE 1700		
CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94111		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JANE SHAO DIRECTOR LUMIERE PAVILIONS, 105 YAOJIAYUAN RD. BEIJING, 1000025, CN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SUNIL SINGHANIA DIRECTOR RELIANCE MUTUAL FUND, JUPITER MILLS, ELPHINST MUMBAI, 400013, IN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROGER URWIN DIRECTOR TOWERS WATSON, LONDON ROAD REIGATE, SURREY, RH2 9PQ, GB	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ JOSEPH P. LANGE SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JOSEPH P. LANGE, SECRETARY PRINTED NAME AND CORPORATE TITLE	7/24/2013 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			